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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	09/676,448					
Filing Date	September 29, 2000					
First Named Inventor	Shawn D. Cartwright					
Group Art Unit	3621					
Examiner Name	Calvin L. Hewitt, II					
Attorney Docket Number	26806.000					

To: Assistant Commissioner for Patents PO Box 1450 Alexandria, VA 23313-1450										
I hereby apply to withdraw as attorney or agent for the above identified patent application. The reasons for this request are:										
Client has an outstanding balance from September 2005 and has refused to pay the attorney of record. We request that further communications be sent to the client directly Shawn D. Cartwright. It is submitted that the client/applicant would not be prejudiced by the granting of this petition.										
The correspondence address is NOT affected by this withdrawal.										
2. A Change the correspondence address and direct all future correspondence to:										
CORRESPONDENCE ADDRESS										
Customer Num	ber	Place Customer Number Bar Code Label here								
OR										
Firm or Individual Name	е	Shawn D. Cartwright								
Address		Theados Corporation								
Address		4109 East-West Highway								
City		Hyattsville		State	MD	ZIP	20782			
Country				USA						
Telephone		(215) 668-5817		Fax	(3	(301) 779-4109				
This request is made on behalf of myself and all the attorneys/agents of record, the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number This request is enclosed in triplicate (including any attachments).										
Name	R. Lewis Gable									
Signature	Hawn Oxell									
Date		December 22, 2005								
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time										

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.